



Credit Application

for curriculum financing

6921 Steeles Ave. W. Unit #8, Toronto, ON M9W 6T5
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Applicant 1

FIRST NAME		MIDDLE INITIAL	LAST NAME		SOCIAL INSURANCE NUMBER
ADDRESS		YEARS THERE	CITY		PROV POSTAL CODE
EMAIL ADDRESS		HOME PHONE	CELL PHONE		BIRTH DATE (MM/DD/YYYY)
PREVIOUS ADDRESS		YEARS THERE	CITY		PROV POSTAL CODE
REFERENCES (NOT LIVING WITH YOU) 1			PHONE		RELATION
REFERENCES (NOT LIVING WITH YOU) 2			PHONE		RELATION

Job Details

EMPLOYER (FULL NAME)	POSITION	BUSINESS PHONE	EXTENSION	YEARS THERE
WORK ADDRESS				
PREVIOUS EMPLOYER	POSITION	BUSINESS PHONE	EXTENSION	YEARS THERE

Co-signer Information

FIRST NAME		MIDDLE INITIAL	LAST NAME		PHONE
RELATIONSHIP TO YOU		SOCIAL INSURANCE NUMBER		BIRTH DATE (MM/DD/YYYY)	
ADDRESS		YEARS THERE	CITY		PROV POSTAL CODE
DO YOU OWN OR RENT?	MORTGAGE AMOUNT (IF OWN)	PHONE		EMAIL ADDRESS	

Financial Information and Personal Net Worth Statement

YOUR GROSS MONTHLY INCOME (BORROWER 1) \$			GROSS MONTHLY INCOME (BORROWER 2) \$		
ASSETS	DESCRIPTION	ESTIMATED MARKET VALUE	LIABILITIES	DESCRIPTION	AMOUNT
Cash in Chequng and Savings		\$	Loans, Line of Credit, Credit Cards		\$
Real Estate		\$	Real Estate Mortgage		\$
Stocks, Bonds, RRSPs, GIC's		\$	Stocks, Bonds, RRSP, GIC Loan		\$
Auto (Yr. & Type)		\$	Auto Loan		\$
TOTAL ASSETS		\$	TOTAL LIABILITIES		\$
TOTAL NET WORTH (NET WORTH EQUALS TOTAL ASSETS minus TOTAL LIABILITIES)					\$

Driving School and Loan Information

DRIVING SCHOOL NAME AND ADDRESS		DRIVING SCHOOL PHONE
AMOUNT TO FINANCE \$	FINANCE TERM	DRIVING SCHOOL EMAIL ADDRESS

Certification and Consent to Collect, Use and Disclose Information

I, the Applicant, warrant and confirm that the information given herein is true and correct and I understand that it is being used to determine my credit responsibility. CIK Capital Corp. or its affiliates are authorized to obtain, and any source is authorized to disclose, any information CIK Capital Corp. may require at any time relative to this application from each source to which CIK Capital Corp. may apply and each such source is hereby authorized to provide CIK Capital Corp. with such information. CIK Capital Corp. is furthermore authorized to disclose in response to direct inquiries from lenders or credit bureaus, such information on any loaning account as you consider appropriate and I agree to Indemnify CIK Capital Corp. against and save you harmless from any and all claims in damages or otherwise arising from such disclosure on your part. I specifically acknowledge that CIK Capital Corp. may disclose my personal information regardless of when or how such information was collected, to related companies, financial institutions and credit providers with whom CIK Capital Corp. has financial relations.

X _____
 APPLICANT 1 SINGATURE

X _____
 APPLICANT 2 SINGATURE

 DATE